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DECLARATION FOR UTILITY OR

Attorney Docket Number

DESIGN PATENT APPLICATION (37 CFR 1.63)			First Name	d inventor	J. R	1 CHARD	SHIH	
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			Application	Number		 		
Declaration Submitted OR With Initial		ition	Filing Date	· · · · · · · · · · · · · · · · · · ·	1	0-29-53	3	
		ed after Initial urcharge R 1.16 (e))	Art Unit		1			
Filing	(37 CFI require		Examiner N	lame				
I hereby declare that:								
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.								
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
A Medical / Dental device combines a Bite-Block, a mirror								
extension and orphysiological shape to rest the tongue as one								
extension and orphysiological shape to rest the tongue as one tongue-safe device.								
(Title of the Invention)								
the specification of which								
is attached hereto								
OR			_					
was filed on (MM/DD/)	^^Y)	as United States Application Number or PCT Intern				International		
Application Number and was amend			on (MM/E	//////////////////////////////////////				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority inventor's or plant breeder's a country other than the United application for patent, invento	rights certificate States of Amer or's or plant bree	(s), or 365(a) of any rica, listed below and eder's rights certifica	/ PCT inte d have als	emational app o identified b	olication wh elow, by ch	ich designate ecking the bo	d at least one ox, any foreign	
Prior Foreign Application	Uni which phonty	ris claimed. Foreign Filing	Date	Prio	rity	Certified Co	py Attached?	
Number(s)	Country	(MM/DD/YYY		Not Cla		Yes	No No	
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 23213-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number: 000039291 OR Correspond nce address below								
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) J. Richard Family Name or Surname Shih								
Inventor's Signature	Date							
	intry Citizenship U.S. permanent resident							
12/12 Scripps Summit Do. #C								
San Diego State CA	ZIP 92131 Country USA							
NAME OF SECOND INVENTOR:	A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Stephanie	Family Name or Surname							
Inventor's Signature	Date							
Residence: City State CA Cou	ntry Citizenship U.S. A U.S. permanent resident							
12/12 Scripps Summit Dr. #C								
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Additional inventors or a legal representative are being named on the supplemental sheet/s) PTO/SP/024 or 021 R attached hereto								